

State of Minnesota**District Court**

County

Judicial District: _____

Court File Number: _____

Case Type: Juvenile

In Re Welfare of:

**Affidavit for Restitution
Minn. Stat. §611A.04**

_____, being duly sworn, states the following losses were incurred, or the following property was damaged, stolen or destroyed by , juvenile.

List the value and/or damage of each property item. Also include other out of pocket losses resulting from the crime. (Attach estimates or receipts. Attach another sheet if necessary.)

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
TOTAL:	\$ _____

My losses/damages (were) (were not) covered by insurance.

Name of insurance company _____

Policy No. _____ Amount of deductible _____

Claim No. _____ and/or uninsured loss: \$ _____

☐ Insurance claim has been submitted but has not been paid.

Dated: _____

Signature (Sign only in front of notary public or court administrator.)

Name: _____

Sworn/affirmed before me this

Address: _____

_____ day of _____, _____.

City/State/Zip: _____

Telephone: (_____) _____

Notary Public \ Deputy Court Administrator

NOTE: This affidavit for restitution must be completed and returned to the court administrator not later than _____, _____. Failure to claim restitution will not result in the loss of the right to pursue any other civil remedy available by law.